The Healing Power Of Magnets

For hundreds of years, observations have been made about the therapeutic effects of magnets.

Even the FDA has moved to classify the application of static magnetic fields to human diagnosis and therapy as "not essentially harmful".

Part 2

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RESEARCH IMPLICATIONS FROM CLINICAL OBSERVATIONS

mplications for definitive controlled research stemming from objective research observations and single case anecdotal clinical observations are suggestive of the following:

1) Determine the pH shift during deliberate test exposure to foods, chemicals and inhalants.

<u>Clinical Observations</u>: Testing saliva pH before and one hour after food test meals demonstrates a consistent pattern of acidosis when symptoms occur.

 The degree of intactness of pH buffer system during exposure to the positive magneto-electric fields and separately to the negative magnetoelectric fields.

<u>Clinical Observations</u>: The negative magneto-electric field is observed to relieve the acidosis and symptoms occurring from maladaptive reactions to food, be these immunologic or non-immunologic, and has not been observed to lead to any evidence of over-alkalinisation.

3) The degree of reversibility of insoluble gels produced by a state of acute acidosis¹⁰ when exposed to a negative magneto-electric field. <u>*Clinical Observations:*</u> Symptoms of cardiac atherosclerosis and symptoms of brain atherosclerosis have been observed to disappear after six to eight weeks of nightly exposure to a negative magneto-electric field. Is this evidence that the insoluble gels are undergoing resolution?

4) Degree of oxygenation and oxidation metabolism of tissues during exposure to a negative magneto-electric field.

<u>Clinical Observations</u>: A man in his sixties began to have pain in his heart. This was diagnosed as arteriosclerosis of the heart. He was given a number of EDTA chelations. In spite of this, by age 70 he was having so much pain in his heart that he underwent cardiac bypass surgery. He did fairly well for two years, but by the age of 72 began again to have pain in his heart, and this time he was also having difficulty with mental function. He was getting lost in his own neighbourhood. His gait was shuffling and he would stumble. His speech was thick and could hardly be understood. He was in a state of depression. At age 74, he decided to give magnetics a trial. He placed over his heart a plastiform magnetic $3" \times 4" \times 1/8"$. Within ten minutes there was no pain in his heart. He began sleeping with magnets at the top of his head. Within a week he was markedly improved. At one month he was observed to be outgoing, not depressed, speech was clear, he was not shuffling and stumbling and was not getting lost in his own neighbourhood.

The fact that the symptom of pain in his heart was relieved within ten

minutes is suggestive that oxygenation and improved oxidation metabolism of the tissues of the heart had occurred. His rapid improvement of the mental function and affect could also most likely be explained by oxygenation and improved oxidation metabolism occurring before there is any evidence of resolution of atheromatous plaques.

5) Degree of antibiotic effect of micro-organism infection during exposure to a negative magneto-electric field.

<u>Clinical Observations</u>: a) A man with a toothache and a periodontal abscess exuding pus, obtained relief from the pain within ten minutes of exposure from the negative magnetoelectric field of a static magnet. Magnets were left on the infected area for four days, at which time he was examined by a dentist and no infection was found.

b) A woman with candidiasis of the vagina obtained relief of the symptoms and evidence of the fungal infection dying out when daily sitting on the negative magneto-electric pole of a static magnetic field.

6) Degree of electrical control of brain electrical activity during brain exposure to a negative magneto-electric field. <u>Clinical Observations</u>: a) A man whose initial psychosis was precipitated by exposure to pesticides and carbon exhaust was hospitalised for a period of two months. He was well for a period of eighteen years. When re-exposed to a massive dose of petrochemicals, he again became psychotic. The negative magneto-electric fields of magnets were placed bitemporally, and within ten minutes he was sane and had dropped his delusions that someone was seeking to kill him.

b) A teenage girl with a schizo-affected psychosis had

attempted suicide. The parents reported the observation that after eating wheat she would be depressed and socially withdrawn to her room for a period of four days. A test meal of wheat evoked depression, a flat affect, headache, stomach ache and social withdrawal. Forty-five minutes of negative magneto-electric energy applied to her spine and head produced a deep sleep and a complete reversal of her symptoms. Exposure of her head to a negative magneto-electric field ahead of a test meal of a symptom-evoking food, prevented the reaction from occurring.

c) A teenager with temporal lobe confusion-type seizures, evoked during a deliberate food test meal of eggs, had no seizure on a subsequent test meal of eggs when negative magneto-electric pole of magnets were placed on the temporal areas.

7) Degree of melatonin production by the pineal gland during sleep with the crown of the head exposed to a negative magneto-electric field.

<u>Clinical Observations</u>: A man in his 70s, while sleeping with magnets at the crown of his head, slept more soundly and ceased having sleep apnoea. This could be considered significant because sleep apnoea has been demonstrated to be a melatonin deficiency.

8) Degree of growth hormone rise during sleep when the crown of the head is exposed to a negative magneto-electric field.

<u>Clinical Observations</u>: a) A man in his 70s, sleeping with magnets at the crown of his head, has to cut his fingernails once a week whereas, before treatment, it was once every six

weeks and he has to get his hair cut twice as often as before magnetic treatment.

b) A woman in her 70s, sleeping with magnets at the crown of her head, had a change in the hair on her head from brittle to normal, and regrowth hair on her legs and under her arms which had virtually disappeared after menopause.

Growth hormone is in control of the growth of hair, nails, and skin.

SUMMARY OF MAGNETIC RESONANCE THERAPEUTIC RESEARCH PROJECT NEEDS

Acute maladaptive reactions, both immunologic and nonimmunologic, are cellularly acidifying. Chronic metabolic illnesses are cellularly acidifying. A negative magneto-electric energy is normalising for cellular pH and thus valuable in both acute and chronic symptom relief. Hypoxia is present in acidic states and thus present in acute and chronic symptoms. Negative magneto-electric energy is oxygenating and oxidating, as well as being a free-radical scavenger. A negative magneto-electric field energy raises melatonin production by the pineal gland. Melatonin has a master control over the entire energy system of the human body. A negative magneto-electric energy field gives evidence of being a universal antibiotic. How effectively can magnetic resonance therapy reverse viral infections, bacterial infections, fungal infections and parasites? How effectively can magneto-electric field energy reverse degenerative diseases such as maturity-onset diabetes mellitus and its complications, chronic inflammatory and/or autoimmune diseases (arthritis, myositis, fibrositis, scleroderma, lupus, etc.)? How effective can magneto-electric field energy be in treating a host of physical and mental

illnesses? Anecdotal clinical cases indicate these questions deserve to be answered. It is the aim of the IRB [Institutional Review Board] of BEMI [Bio-Electro-Magnetics Institute] to answer these questions.

The production of magnetic resonance requires the presence of a pulsing frequency.¹¹ In humans, the pulsing frequency is provided by the brain. Sleep, with its increased microvoltage amplitude during pulsing frequencies, is the optimum generator of biological electromagnetic energy produced by magnetic resonance. Three methods are available to increase electromagnetic energy production during sleep in humans: (1) externally increased magneto-electric energy field from the negative magnetic field of a static-field magnet; (2) external source of pulsing frequencies increasing the amplitude of pulsing frequencies occurring during sleep; (3) combining (1) and (2) provides optimum building of electromagnetic energy fields for the brain which in turn governs the electromagnetic fields of the body.

REFERENCES

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